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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is of your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trusteen	M Middle name Edmonds	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you h used in the last 8 year Include your married or maiden names.	s		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	of xxx-xx-4689		

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Case number (if known)

Debtor 1 Travis M Edmonds

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs **EINs** Where you live If Debtor 2 lives at a different address: 18400 Chicago Avenue Lansing, IL 60438 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Document Case number (if known) Debtor 1 Travis M Edmonds

art	Tell the Court About	Your Bank	ruptcy C	ase					
•	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapt	Chapter 7						
		☐ Chapt	ter 11						
		☐ Chapt	ter 12						
		☐ Chapt	ter 13						
•	How you will pay the fee	abo ord	out how yeller. If you	y the entire fee when I file my petition. Please check with the clerk's office in your local court for more details by you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with nted address.					
				y the fee in installment ee in Installments (Officia		tion, sign and attach the Application for Individuals to Pay			
		☐ I re but app	equest the is not recolles to yo	at my fee be waived (Yo quired to, waive your fee our family size and you a	ou may request this option and may do so only if you unable to pay the fee	on only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition.			
	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.	District		Whon	Coop number			
			District District		When When	Case number Case number			
			District		When	Case number Case number			
			District		Wileli	Case number			
).	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor	-		Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
١.	Do you rent your	□ No.	Go to	line 12.					
	residence?	Yes.	Has y	our landlord obtained an	eviction judgment agair	nst you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial State</i> bankruptcy petition.	ement About an Evictior	n Judgment Against You (Form 101A) and file it with this			

		☐ Yes.	I am filing	g under Chapter 11 and I	am a small business debtor according to the	definition in the Bankruptcy Code.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing Code.	g under Chapter 11, but I	am NOT a small business debtor according to	o the definition in the Bankruptcy
	For a definition of small	■ No.	I am not	filing under Chapter 11.		
	debtor?		` / `	,		
3.	Chapter 11 of the	deadlines. operations,	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set apples. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statens, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process. C. 1116(1)(B).			
				lone of the above		
				Commodity Broker (as def	ined in 11 U.S.C. § 101(6))	
				Stockbroker (as defined in	11 U.S.C. § 101(53A))	
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
				lealth Care Business (as	defined in 11 U.S.C. § 101(27A))	
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	a				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			business, if any	Codo	
	A sala manadatanahin isa	☐ Yes.	Name an	nd location of business		
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Pa			
art	Report About Any Bus	sinesses Yo	ou Own as	a Sole Proprietor		
eb	tor 1 Travis M Edmonds			Document	Page 4 of 59 Case number (if known)	
	Case 18-0	9925	Doc 1	Filed 04/04/18	Entered 04/04/18 18:46:23	Desc Main

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

	No.
_	

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Travis M Edmonds

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 59 Case number (if known) Debtor 1 **Travis M Edmonds** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **2**5,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50.000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Travis M Edmonds Signature of Debtor 2 Travis M Edmonds Signature of Debtor 1 Executed on April 4, 2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Travis M Edmonds Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Allison K. Muth	Date	April 4, 2018
Signature of Attorney for Debtor	_	MM / DD / YYYY
Allians I/ Moth C240405		
Allison K. Muth 6318105		
Printed name		
Justice Law Group		
Firm name		
6847 W. Cermak Road		
Berwyn, IL 60402-2241		
Number, Street, City, State & ZIP Code		
Contact phone 708-400-0000	Email address	allison.muth.law@gmail.com
6318105 IL		
Bar number & State		

	1200:1111	eni Paue 8 01 59		
mation to identify your	case:			
Travis M Edmond	ls			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				☐ Check if this is an amended filing
	Travis M Edmond First Name	Travis M Edmonds First Name Middle Name First Name Middle Name	Travis M Edmonds First Name Middle Name Last Name First Name Middle Name Last Name	Travis M Edmonds First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,258.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,258.00
Pa	rt 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	16,651.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	109,800.88
	Your total liabilities	\$	126,451.88
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,124.40
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,792.00
Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	nersonal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Travis M Edmonds Document Page 9 of 59
Case number (if known)

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	36,058.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	36,058.00

		Doct	ment Page 10 of 59		
Fill in this	information to identify y	our case and this filing:			
Debtor 1	Travis M Edm	onds			
20010	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the	ne: NORTHERN DISTR	ICT OF ILLINOIS		
Case numb	oer				
					amended filing
Official	Form 106A/B				
<u>Scne</u>	dule A/B: Pro	operty			12/15
hink it fits b nformation. Answer ever	est. Be as complete and ac If more space is needed, at y question.	curate as possible. If two n tach a separate sheet to thi	nly once. If an asset fits in more than on arried people are filing together, both a s form. On the top of any additional pages.	are equally responsible for supp	lying correct
Part 1: Des	scribe Each Residence, Bui	lding, Land, or Other Real E	state You Own or Have an Interest In		
. Do vou ov	wn or have anv legal or egu	itable interest in anv reside	nce, building, land, or similar property?	•	
,	,	,	,		
No. Go	to Part 2.				
☐ Yes. W	Vhere is the property?				
_					
Part 2: Des	scribe Your Vehicles				
	se drives. If you lease a vi	,	hedule G: Executory Contracts and U	Jnexpirea Leases.	
	Niccon			Do not deduct secured clain	ns or exemptions. Put
3.1 Make	mavima		interest in the property? Check one	the amount of any secured of	claims on Schedule D:
Mode	·	Debtor 1	• •	Creditors Who Have Claims	Secured by Property.
Year		Debtor 2	•		Current value of the
	roximate mileage:er information:		and Debtor 2 only	entire property?	portion you own?
Ollie	i illoittiation.	At least o	ne of the debtors and another		
		☐ Check if	this is community property	\$11,258.00	\$11,258.00
		(see instru			
Examples ■ No □ Yes 5 Add the pages y	s: Boats, trailers, motors, p	personal watercraft, fishing the sound in th	ational vehicles, other vehicles, and yessels, snowmobiles, motorcycle and ur entries from Part 2, including an ere	ny entries for	\$11,258.00
·	, ,		•	po Do	rtion you own? not deduct secured ims or exemptions.
. Househo	old goods and furnishin	qs			

Examples: Major appliances, furniture, linens, china, kitchenware

■ No

Official Form 106A/B Schedule A/B: Property

		Case 18-09925	Doc 1	Filed 04/04/18	Entered 04/04/18 18:46:23 Page 11 of 59	Desc Main
D	ebtor 1	Travis M Edmonds		Document	Case number (if known)	
	☐ Yes.	Describe				
7.	_				oment; computers, printers, scanners; music co	ollections; electronic devices
	■ No □ Yes.	Describe				
8.	Example No	bles of value les: Antiques and figurines; pother collections, memo			oks, pictures, or other art objects; stamp, coin,	or baseball card collections;
9.	Example No	ent for sports and hobbies les: Sports, photographic, ex musical instruments		other hobby equipment; t	picycles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
10	■ No	ns bles: Pistols, rifles, shotguns Describe	s, ammunition	ı, and related equipment		
11	■ No	s bles: Everyday clothes, furs, Describe	leather coats	s, designer wear, shoes,	accessories	
12	■ No		ume jewelry,	engagement rings, wedd	ding rings, heirloom jewelry, watches, gems, g	old, silver
13	Examp ■ No	rm animals ples: Dogs, cats, birds, horse Describe	es			
14	■ No	her personal and househo		ı did not already list, ir	ncluding any health aids you did not list	
1		the dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$0.00
Pa	art 4: De	scribe Your Financial Assets				
D	o you ow	vn or have any legal or eq	uitable intere	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	■ No	oles: Money you have in you	-		osit box, and on hand when you file your petition	on
17				I accounts; certificates o ounts with the same inst	of deposit; shares in credit unions, brokerage h titution, list each.	ouses, and other similar
	☐ Yes			Institution n	ame:	

Official Form 106A/B Schedule A/B: Property

page 2

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Case number (if known) Document Debtor 1 **Travis M Edmonds** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 3

De	btor 1	Travis M Edmon	ds	Document	Page 13 of 59 Case number (if known)	
			us			
		support oles: Past due or lump	sum alimony, spousal	support, child suppo	ort, maintenance, divorce settlement, property	settlement
	☐ Yes.	Give specific informat	ion			
					efits, sick pay, vacation pay, workers' comper	nsation, Social Security
		Give specific informa	tion			
	Exam _l	ets in insurance polic oles: Health, disability,		th savings account (HSA); credit, homeowner's, or renter's insurar	nce
	■ No					
	⊔ Yes.	Name the insurance of	company of each policy Company name:	and list its value.	Beneficiary:	Surrender or refund value:
	If you a some of				ed surance policy, or are currently entitled to rece	eive property because
		•				
	Examµ ■ No		yment disputes, insura		it or made a demand for payment s to sue	
	■ No	contingent and unliq Describe each claim.		ry nature, includin	g counterclaims of the debtor and rights to	set off claims
	■ No	nancial assets you di	-			
	⊔ Yes.	Give specific informa	tion			
36			•		ny entries for pages you have attached	\$0.00
Pa	rt 5: De	scribe Any Business-R	elated Property You Owi	n or Have an Interest	In. List any real estate in Part 1.	
37.	Do you	own or have any legal o	or equitable interest in ar	ny business-related p	roperty?	
	No. Go	to Part 6.				
	☐ Yes. C	Go to line 38.				
Pai			Commercial Fishing-Rela st in farmland, list it in Par		n or Have an Interest In.	
46.	_ `	u own or have any leg	gal or equitable intere	est in any farm- or o	commercial fishing-related property?	
	∟ Yes	. Go to line 47.				
Pa	rt 7:	Describe All Property	/ You Own or Have an In	terest in That You Dic	d Not List Above	
	Examp		of any kind you did country club membersh			
	■ No □ Yes.	Give specific informat	ion			

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Case number (if known) Document Debtor 1 **Travis M Edmonds**

54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$11,258.00 Part 3: Total personal and household items, line 15 57. \$0.00 Part 4: Total financial assets, line 36 58. \$0.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$11,258.00 Copy personal property total \$11,258.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$11,258.00

Official Form 106A/B Schedule A/B: Property page 5

			Document	Page 15 of 59	_	
Fil	ll in this informa	tion to identify your ca	ase:			
De	ebtor 1	Travis M Edmonds				
D-	ahtar O	First Name	Middle Name	Last Name		
	ebtor 2 pouse if, filing)	First Name	Middle Name	Last Name		
Un	nited States Bank	ruptcy Court for the:	NORTHERN DISTRICT OF I	ILLINOIS		
Са	ase number					
(if k	known)					Check if this is an amended filing
_					_	amended ming
	fficial For					
S	chedule	C: The Pro	perty You Cla	im as Exempt		4/16
For speany fun exe	eded, fill out and se number (if kno reach item of precific dollar amoy applicable stated art 1:	attach to this page as m wn). roperty you claim as ex- punt as exempt. Alternations and the count as exempt. Some exem- limited in dollar amount atticular dollar amount attatutory amount. the Property You Claim xemptions are you claim	any copies of Part 2: Addition kempt, you must specify the atively, you may claim the functions—such as those for it. However, if you claim an and the value of the propert m as Exempt iming? Check one only, even	as your source, list the property that you hal Page as necessary. On the top of any e amount of the exemption you claim. It will fair market value of the property be health aids, rights to receive certain be exemption of 100% of fair market value y is determined to exceed that amount on if your spouse is filling with you.	additional p One way of ing exempt enefits, and e under a li	doing so is to state a ded up to the amount of d tax-exempt retirement aw that limits the
	You are clair	ming state and federal n	onbankruptcy exemptions. 1	I1 U.S.C. § 522(b)(3)		
	☐ You are clair	ming federal exemptions	s. 11 U.S.C. § 522(b)(2)			
2.	For any prope	rty you list on <i>Schedul</i>	le A/B that you claim as exe	empt, fill in the information below.		
		of the property and line at lists this property	on Current value of the portion you own	Amount of the exemption you claim	Specific la	ws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.		
	2014 Nissan Line from Sche	maxima 58000 miles	\$11,258.00		735 ILCS	5 5/12-1001(c)
	Line from Sche	aule A/B: 3.1		■ 100% of fair market value, up to any applicable statutory limit		
3.	(Subject to adju ■ No	ustment on 4/01/19 and		5? ses filed on or after the date of adjustmen thin 1,215 days before you filed this case	,	

☐ Yes

C	ase 18-09925	Doc 1 Filed 04/04/18 Document	Page 16	u U4/U4/18 18.4 Cof 50	40.23 Desc N	/lall1
Fill in this infor	mation to identify you		Paue 10	(1.39		
Debtor 1	Travis M Edmoi	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the	NORTHERN DISTRICT OF ILLIN	NOIS			
Case number						
(if known)					☐ Check	c if this is an
					amen	ded filing
o.//: E	4000					
Official For	m 106D					
Schedule	D: Creditors	Who Have Claims S	secured	by Property	y	12/15
Be as complete ar	nd accurate as possible.	If two married people are filing together	r, both are eq	ually responsible for su	pplying correct informa	ation. If more space
s needed, copy th number (if known)		out, number the entries, and attach it to	this form. Or	n the top of any addition	nal pages, write your na	me and case
. Do any creditor	s have claims secured by	y your property?				
☐ No. Chec	ck this box and submit t	his form to the court with your other s	chedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill i	in all of the information	below.				
Part 1: List A	All Secured Claims					
<u> </u>		more than one accurred claim, list the gradi	itor congretaly	Column A	Column B	Column C
		more than one secured claim, list the credi a particular claim, list the other creditors i		Amount of claim	Value of collateral	Unsecured
much as possible,	list the claims in alphabeti	cal order according to the creditor's name.	,	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Capital C	ne Auto Finance	Describe the property that secures th	e claim:	\$16,651.00	\$11,258.00	\$5,393.00
Creditor's Nan	me	2014 Nissan maxima 58000 m	niles			
PO Box 3	20205	As of the date you file, the claim is: Cl	heck all that			
	e City, UT 84130	apply.				
	et, City, State & Zip Code	☐ Contingent☐ Unliquidated				
ramber, onec	et, Oity, Otate & Zip Oode	☐ Disputed				
Who owes the d	lebt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		■ An agreement you made (such as me	ortagne or sec	ured		
Debtor 2 only		car loan)	ortgage or sec	uieu		
Debtor 1 and D	Debtor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
	the debtors and another	☐ Judgment lien from a lawsuit	ariic 3 licri)			
Check if this community d	claim relates to a	Other (including a right to offset)				
-	curred 09/2016	Last 4 digits of account number	er 1001			
		-				
Add the deller	value of your optrice in C	olumn A on this nage. Write that number	or here:	\$16,65	1.00	
	•	olumn A on this page. Write that number the dollar value totals from all pages.	si nere.			
Write that numl		pagoo.		\$16,65	1.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Ouse	. 10 00020	Documer	nt Page 1	7 of 59	o Best Main
Fill in this informat	ion to identify your				
Debtor 1	Travis M Edmond	c			
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankr	uptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
>(" - ' - F 4	100E/E				
Official Form 1					40/45
		ho Have Unsecu			12/15 IORITY claims. List the other party to
eft. Attach the Continu ame and case numbe	ation Page to this pag	e. If you have no information			nber the entries in the boxes on the of any additional pages, write your
	nave priority unsecure				
■ No. Go to Part					
Yes.	- .				
	Your NONPRIORIT	Y Unsecured Claims			
Yes. 4. List all of your no unsecured claim, lithan one creditor h	npriority unsecured clast the creditor separately	for each claim. For each clain	er of the creditor who n listed, identify what t	holds each claim. If a creditor hype of claim it is. Do not list claim	nas more than one nonpriority s already included in Part 1. If more ns fill out the Continuation Page of
Part 2.					Total claim
44 45 4	(-	1 4 . P . W .		00.44	
Afs Accep Nonpriority Cr		Last 4 digits	of account number	8341	\$644.00
1475 W Cy	press Creek Rd	When was th	e debt incurred?	05/2014	
	erdale, FL 33090 t City State Zlp Code	As of the date	e vou file, the claim i	is: Check all that apply	
	I the debt? Check one.	7.0 01 1.10 001	o you mo, mo olumi	or or ook all that apply	
■ Debtor 1 o		☐ Contingen	t		
Debtor 2 o	,	☐ Unliquidate			
	nd Debtor 2 only	☐ Disputed	-		
	e of the debtors and and	T	PRIORITY unsecured	d claim:	
	his claim is for a com	По			
debt	ubject to offset?	•		aration agreement or divorce that y	ou did not
■ No		Debts to p	ension or profit-sharin	g plans, and other similar debts	
☐ Yes		Other Spe	ecify		

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Debtor 1 Travis M Edmonds Case number (if know) 4.2 \$5,418.00 Allied Business Services Last 4 digits of account number 3522 Nonpriority Creditor's Name **Allied Business** When was the debt incurred? 03/2014 PO Box 1799 Holland, MI 49422 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 **Allied Business Services** Last 4 digits of account number 9299 \$333.00 Nonpriority Creditor's Name **Allied Business** When was the debt incurred? 04/2014 PO Box 1799 Holland, MI 49422 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 **Allied Business Services** Last 4 digits of account number 7171 \$167.00 Nonpriority Creditor's Name **Allied Business** When was the debt incurred? 05/2014 PO Box 1799 Holland, MI 49422 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Official Form 106 E/F

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Debtor 1 Travis M Edmonds Case number (if know) 4.5 \$561.00 **Ars Collections** Last 4 digits of account number 9851 Nonpriority Creditor's Name **MOney Recovery Nationwide** When was the debt incurred? 02/2014 PO Box 13129 Lansing, MI 48901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Cadillac Accts Rec Mg Last 4 digits of account number 4.6 3322 \$56.00 Nonpriority Creditor's Name CARM When was the debt incurred? 04/2014 **PO Box 358** Cadillac, MI 49601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **Capital One Auto Finance** \$16,651.00 Last 4 digits of account number 1001 Nonpriority Creditor's Name PO Box 30285 When was the debt incurred? 09/2016 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Travis M Edmonds Case number (if know) 4.8 \$1,340.00 **Community Healthcare System** Last 4 digits of account number 3169 Nonpriority Creditor's Name PO Box 88102 When was the debt incurred? 2/19/2018 Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 **Convergent Outsourcing** \$556.00 Last 4 digits of account number 7236 Nonpriority Creditor's Name **COnvergent Outsourcing, Inc** When was the debt incurred? 06/2015 PO Box 9004 Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Creditors Discount & A** 1734 \$1,104.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Cda/Pontiac Attn: Bankruptcy When was the debt incurred? 03/2013 **PO Box 213** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Document Page 21 of 59 Debtor 1 Travis M Edmonds Case number (if know) 4.1 **Creditors Discount & A** 9668 \$1,093.00 Last 4 digits of account number Nonpriority Creditor's Name Cda/Pontiac Attn: Bankruptcy When was the debt incurred? 02/2014 PO Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Creditors Discount & A** 3756 \$1,043.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Cda/Pontiac Attn: Bankruptcy 03/2014 When was the debt incurred? PO Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Creditors Discount & A 8681 \$827.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Cda/Pontiac Attn: Bankruptcy When was the debt incurred? 06/2012 PO Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Page 22 of 59 Case number (if know) Document Debtor 1 Travis M Edmonds 4.1 \$764.00 **Creditors Discount & A** 6899 Last 4 digits of account number Nonpriority Creditor's Name Cda/Pontiac Attn: Bankruptcy When was the debt incurred? 08/2011 PO Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Creditors Discount & A** 3251 \$390.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Cda/Pontiac Attn: Bankruptcy 08/2011 When was the debt incurred? PO Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Custom Coll Srvs Inc** 1720 \$466.00 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 10428 When was the debt incurred? 07/2013 Merrillville, IN 46411 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Case number (if know)

DCDIO	Travis W Eurionus		Case Humber (II know)	
4.1	Custom Coll Srvs Inc	Last 4 digits of account number	3344	\$385.00
	Nonpriority Creditor's Name PO Box 10428	When was the debt incurred?	02/2013	
	Merrillville, IN 46411 Number Street City State Zlp Code		an Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Custom Coll Srvs Inc	Last 4 digits of account number	2163	\$200.00
	Nonpriority Creditor's Name PO Box 10428 Merrillville, IN 46411	When was the debt incurred?	08/2012	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Custom Coll Srvs Inc	Last 4 digits of account number	3345	\$140.00
9	Nonpriority Creditor's Name			********
	PO Box 10428	When was the debt incurred?	02/2013	
	Merrillville, IN 46411 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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Debtor 1 Travis M Edmonds Case number (if know) 4.2 **Custom Coll Srvs Inc** 3856 \$122.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 10428 When was the debt incurred? 07/2013 Merrillville, IN 46411 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **Custom Coll Srvs Inc** 2164 \$67.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 10428 When was the debt incurred? 08/2012 Merrillville, IN 46411 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 Dianon Pathology/LCA Collections 1066 \$83.98 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 2240 When was the debt incurred? **Burlington, NC 27216** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Travis M Edmonds Case number (if know) 4.2 Harris & Harris 1081 \$294.90 Last 4 digits of account number 3 Nonpriority Creditor's Name 111 W. Jackson Blvd When was the debt incurred? 05/12/2017 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **Hertg Accpt** 8D01 \$4,421.00 Last 4 digits of account number Nonpriority Creditor's Name 1420 S. Michigan When was the debt incurred? 04/27/2011 South Bend, IN 46556 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 IN Office of the Attorney General 5026 \$27.606.82 Last 4 digits of account number Nonpriority Creditor's Name Indian Government Center South. When was the debt incurred? 3/27/2017 302 W. Washington Street Indianapolis, IN 46204 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No debt from the Indiana Department of

☐ Yes

Other. Specify Workforce Development

Debtor	1 Travis M Edmonds	Document Page 2	6 of 59 Case number (if know)				
4.2	Institute Foot & Ankle Reconst	Last 4 digits of account number		\$670.65			
	Nonpriority Creditor's Name 9120 Doubletree drive Crown Point, IN 46307	When was the debt incurred?		<u> </u>			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
4.2	Komyatte & Casbon, P.C.	Last 4 digits of account number	7425	\$808.54			
	Nonpriority Creditor's Name 9650 Gordon Drive Highland, IN 46322	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify					
4.2	Kemyette & Cooken D.C.		0365	¢42.06			
8	Komyatte & Casbon, P.C. Nonpriority Creditor's Name	Last 4 digits of account number		\$12.06			
	9650 Gordon Drive Highland, IN 46322	When was the debt incurred?	07/06/2016				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				

■ No □ Yes report as priority claims

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Case Dumber (if know)

Deblo	Travis M Edmonds		Case number (if know)	
4.2	Methodist Hospital	Last 4 digits of account number	2653	\$45.27
	Nonpriority Creditor's Name 27312 Network Place	When was the debt incurred?	5/1/2017	
	Chicago, IL 60673 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	Methodist Physician Group	Last 4 digits of account number	3979	\$17.43
0	Nonpriority Creditor's Name	Last 4 digits of account number		ΨΙΤΙ-ΤΟ
	27338 Network PL	When was the debt incurred?	1/19/18	
	Chicago, IL 60673	_		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	Munster Radiology Group P.C.	Last 4 digits of account number	9235	\$18.80
<u>. </u>	Nonpriority Creditor's Name 18400 Chicago Ave	When was the debt incurred?		
	Lansing, IL 60438			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	u Ciaiiii.	
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	o plans, and other similar debts	
	Yes		g p 3000	
	□ res	Other Specify		

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Debtor 1 Travis M Edmonds Case number (if know) 4.3 **Okolocha Medical Corporation** 4674 \$46.97 Last 4 digits of account number 2 Nonpriority Creditor's Name 2054 Grant Street When was the debt incurred? 10/29/2017 Gary, IN 46404 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 **Penn Credit** 5114 \$200.00 Last 4 digits of account number Nonpriority Creditor's Name **PO Box 988** When was the debt incurred? 04/19/2012 Harrisburg, PA 17108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 **Profess Acct** 3552 \$95.00 Last 4 digits of account number Nonpriority Creditor's Name **Professional Account Management** When was the debt incurred? 08/15/2013 633 W Wisonsin Ave, st 600 Milwaukee, WI 53203 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Travis M Edmonds Case number (if know) 4.3 RRS, Inc. 0118 \$118.14 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O.Box 3333 When was the debt incurred? 1/4/2018 Munster, IN 46321 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify South Bend Orthopaedic 4.3 3070 \$26.59 6 Associates, Last 4 digits of account number Nonpriority Creditor's Name ATTN: 17227C When was the debt incurred? 11/30/2017 P.O. Box 14000 Belfast, ME 04915 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Syliva Garcia 0400 \$3,276.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Kane County Clerk of Court When was the debt incurred? 3/16/2007 540 S. Randall Road Saint Charles, IL 60174 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Judgment fom Kane County Circuit Court, Judicial Officer Stephan Sullivan, Case No. Other. Specify ☐ Yes 2007 LM 000400

Document Page 30 of 59 Debtor 1 Travis M Edmonds Case number (if know) 4.3 \$469.00 The University of Chicago Medicine 0467 Last 4 digits of account number 8 Nonpriority Creditor's Name 33343 Collections Center Drive When was the debt incurred? 10/10/2017 Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 The University of Chicago Medicine 0467 \$116.46 Last 4 digits of account number 9 Nonpriority Creditor's Name 33343 Collections Center Drive When was the debt incurred? 1/4/2018 Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 **Trustmark Recovery Services** \$2.892.32 0 Last 4 digits of account number Nonpriority Creditor's Name 541 Otis Bowen Dr. When was the debt incurred? Munster, IN 46321 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

 \square Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify **45H04-1103-PL-824**

Garnishment Order: Cause No.

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Madison, WI 53704
Number Street City State ZIp Code
Who incurred the debt? Check one.

Debtor 1 only
Debtor 2 only
Debtor 1 and Debtor 2 only
At least one of the debtors and another
Check if this claim is for a community debt
Is the claim subject to offset?

Yes

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

Contingent
Unliquidated
Disputed

Type of NONPRIORITY unsecured claim:
Student loans
Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts
Other. Specify

Page 32 of 59 Case number (if know) Document Debtor 1 Travis M Edmonds

Weng Peng MD	Last 4 digits of account number	\$118.14
Nonpriority Creditor's Name		
3641 Ridge Road	When was the debt incurred?	
Ste 5		
Highland, IN 46322	_	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Tatal	6f.	Student loans	6f.	\$ 36,058.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 73,742.88
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 109,800.88

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		IAMAIIIN		
Fill in this infor	mation to identify your	case:		
Debtor 1	Travis M Edmond	ds		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				
	Number	Street			-
	City		State	ZIP Code	
2.5	<u> </u>		·		
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	,		0.		

		Docume	<u>nt Page 34 of</u>	59	
Fill in thi	s information to identify your	case:			
Debtor 1	Travis M Edmond	le .			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nur	mber				
(if known)					☐ Check if this is an
					amended filing
o	. =				
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
ill it out, our nam	and number the entries in the e and case number (if known)	boxes on the left. Attach . Answer every question.	the Additional Page to	this page. On the top	eeded, copy the Additional Page, of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse a	s a codebtor.	
)				
■ Ye	es				
	ithin the last 8 years, have you na, California, Idaho, Louisiana,				states and territories include
■ No	o. Go to line 3.				
□Y€	es. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in lin Form	ie 2 again as a codebtor only i	f that person is a guarant	tor or cosigner. Make su	ire you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor	50.4			ditor to whom you owe the debt
	Name, Number, Street, City, State and Z	P Code		Check all schedules	s that apply:
3.1	theresa correa			□ Cobodulo D. lir	
3.1	lileiesa correa			☐ Schedule D, lir	
				■ Schedule E/F,	line 4.37
				☐ Schedule G Syliva Garcia	
				Syliva Galcia	
3.2	Theresa Correrra			☐ Schedule D, lir	
				☐ Schedule E/F,	
				☐ Schedule G	<u></u>
				Silvia Garcia	

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	in this information to	identify your ca Travis M Edi												
Dei	DIOI 1			_										
Debtor 2 (Spouse, if filing)						_								
Uni	ited States Bankrupt	cy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_								
(If kr	se number		□ A □ A	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:										
Official Form 106I							MM / DD/ YYYY							
S	chedule I: `	Your Inco	ome								12/15			
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you arated and you	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and your sith you, do not inclu	spouse i de inforr	s liv nati	ing with on about	you, inclu your spo	ude info use. If	ormation about more space is	t your needed,			
1.	Fill in your emplo	oyment		Debtor 1				Debtor 2 or non-filing spouse						
	If you have more t	te page with ut additional	Employment status	■ Employed				☐ Employed						
	attach a separate		Linployment status	☐ Not employed				☐ Not employed						
	employers.		Occupation	Nurse										
	Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.		Employer's name	Lake County Nu Rehabilitation C										
			Employer's address	5025 McCook Avenue East Chicago, IN 46312										
			How long employed to	here?				_						
Pai	rt 2: Give Det	ails About Mor	thly Income											
Esti	<u>'</u>	me as of the da	ate you file this form. If	you have nothing to re	eport for	any	line, write	\$0 in the	space.	Include your no	n-filing			
	ou or your non-filing s e space, attach a se		ore than one employer, co	ombine the information	n for all e	mpl	oyers for	that perso	n on the	e lines below. If	you need			
							For Deb	otor 1		Debtor 2 or filing spouse				
2.		List monthly gross wages, salary, and commissions (bef deductions). If not paid monthly, calculate what the monthly			2.	\$	1,	187.08	\$	N/A	-			
3.	Estimate and list		3.	+\$		0.00	+\$_	N/A	-					
4.	4. Calculate gross Income. Add line 2 + line 3.				4.	\$	1,18	37.08	\$_	N/A				

Official Form 106I Schedule I: Your Income page 1

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Debtor 1		Travis M Edmonds				number (if knowr					_		
					For Debtor 1			For Debtor 2 or non-filing spouse					
	Cop	by line 4 here	4.		\$_	1,187.0	<u>8</u>	\$		N/A	<u>.</u>		
5.	List	all payroll deductions:											
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	262.68	8	\$		N/A			
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.0	0	\$		N/A			
	5c.	Voluntary contributions for retirement plans	50).	\$_	0.0	0	\$		N/A			
	5d.	Required repayments of retirement fund loans	50	d.	\$_	0.0	0	\$		N/A	_		
	5e.	Insurance	5e		\$_	0.0	_	\$		N/A	_		
	5f.	Domestic support obligations	5f.		\$ _	0.0	_	\$		N/A	_		
	5g. 5h.	Union dues Other deductions. Specify:	5g		\$ \$	0.0		* + \$		N/A N/A	_		
•			_		· –		_	· —			_		
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	262.6		\$		N/A	_		
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ _	924.4	<u>) </u>	\$		N/A	<u>-</u>		
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a	\$	0.0	n	\$		N/A			
	8b.	Interest and dividends	8b		\$ -	0.0	_	\$		N/A	_		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			· –		_	,			_		
	8d.	settlement, and property settlement. Unemployment compensation	80 80		\$ \$	0.0	_	\$		N/A N/A	_		
	8e.	Social Security	86		\$ -	1,200.0		\$		N/A	_		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_	0.0	0	\$		N/A	_		
	8g.	Pension or retirement income	80		\$_	0.0		\$		N/A	_		
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0.0	<u>)</u> -	+ \$		N/A	<u>. </u>		
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	1,200.0	D	\$		N/	A		
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,124.40 +	\$		N/A	= \$	2,124.4	<u>4</u> 0	
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		2,124.40	*-		14//		2,12-7.	-	
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe			•				∍ J. +\$	0.0	00	
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	2,124.	40	
13.	13. Do you expect an increase or decrease within the year after you file this form?No.									Combined monthly income			
	_	Voc Evoloin:											

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	our case:			1		
	tor 1	Travis M Edi				Chec	ck if this is:	
		TIAVIS IVI LUI	ilolius				An amended filing	
	tor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter the following date:
'					010	_	·	
Unit	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	e number							
(II KI	nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/1
Be	as complete a	and accurate as	possible eded, atta	If two married people ar ch another sheet to this				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to		in a sonar	ate household?				
	□ 103. D00		iii a sepai	ate flouseffold:				
			st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		20	Yes
					Daughter		22	□ No ■ Yes
					Dauginei			■ Yes □ No
					Daughter		23	■ Yes
								□ No
3.	Do vour exp	enses include	_	Na				☐ Yes
0.	expenses of	f people other to d your depende	han $_{f \Box}$	No Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
Incl	lude expense	s paid for with	non-cash	government assistance i	f you know			
the		n assistance an		luded it on Schedule I:			Your exp	enses
(Oil	iiciai Foiiii 10	OI.)					. ou. oxp	
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4. \$	S	1,500.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	3	0.00
		rty, homeowner's				4b. \$	S	0.00
		maintenance, re owner's associat		ıpkeep expenses dominium dues		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

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Deb	otor 1	Travis M	Edmonds		Case num	ber (if known)	
6.	Utiliti	ies:					
-	6a.	Electricity,	heat, natural gas		6a.	\$	200.00
	6b.	Water, sev	ver, garbage collection		6b.	\$	0.00
	6c.		e, cell phone, Internet, satellite, and	cable services	6c.	\$	0.00
	6d.	Other. Spe	ecify:		6d.	\$	0.00
7.	Food		ekeeping supplies			\$	300.00
8.			hildren's education costs		8.	\$	0.00
9.			ry, and dry cleaning		9.	\$	0.00
10.		•	roducts and services		10.	\$	0.00
		•	ntal expenses		11.	·	180.00
			Include gas, maintenance, bus or tr	ain fare.		*	
			ar payments.		12.	\$	100.00
13.	Ente	rtainment,	clubs, recreation, newspapers, m	agazines, and books	13.	\$	0.00
14.	Char	itable cont	ributions and religious donations		14.	\$	0.00
15.	Insur	rance.	_			-	
	Do no	ot include in	surance deducted from your pay or	included in lines 4 or 20.			
	15a.	Life insura	nce		15a.	\$	0.00
	15b.	Health ins	urance		15b.	\$	0.00
	15c.	Vehicle ins	surance		15c.	\$	126.00
	15d.	Other insu	rance. Specify:		15d.	\$	0.00
16.			clude taxes deducted from your pay	or included in lines 4 or 20.			
	Spec	,			16.	\$	0.00
17.			ease payments:				
			ents for Vehicle 1		17a.	·	386.00
			ents for Vehicle 2		17b.	· -	0.00
		Other. Spe	-		17c.	\$	0.00
		Other. Spe			17d.	\$	0.00
18.			of alimony, maintenance, and sup		40	Φ.	0.00
4.0			your pay on line 5, Schedule I, Yo		18.	\$	
19.			s you make to support others who	do not live with you.		\$	0.00
00	Spec	· —			19.		
20.			erty expenses not included in line	s 4 or 5 of this form or on Sched			0.00
			on other property		20a.	· -	0.00
		Real estat			20b.	·	0.00
			nomeowner's, or renter's insurance		20c.		0.00
			ce, repair, and upkeep expenses		20d.	·	0.00
			er's association or condominium du	2 S	20e.	·	0.00
21.	Othe	r: Specify:			21.	+\$	0.00
22.	Calcı	ulate vour i	monthly expenses				
			through 21.			\$	2,792.00
			2 (monthly expenses for Debtor 2), i	any, from Official Form 106.I-2		\$	2,102.00
			a and 22b. The result is your month			\$	2 702 00
	226.7	Auu IIIIe 22	a and 22b. The result is your month	y expenses.		Φ	2,792.00
23.	Calcu	ulate your i	monthly net income.				
	23a.	Copy line	12 (your combined monthly income)	from Schedule I.	23a.	\$	2,124.40
	23b.	Copy your	monthly expenses from line 22c ab	ove.	23b.	-\$	2,792.00
							,
	23c.	Subtract y	our monthly expenses from your mo	nthly income.			667.69
			is your monthly net income.		23c.	\$	-667.60
	_						
24.			an increase or decrease in your ex ou expect to finish paying for your car loat				so or degrees because of a
			ou expect to finish paying for your car loai terms of your mortgage?	i within the year of do you expect your n	nortgage	payment to mcrea	se of decrease because of a
	■ No		ionio di your mongago:				
			Evalois horo				
	☐ Ye	es.	Explain here:				

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Fill in this infor	mation to identify your	case:			
Debtor 1	Travis M Edmon				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For					
Declarat	tion About a	an Individua	l Debtor's Sc	hedules	12/15
obtaining mone years, or both. 1		n connection with a ban			ent, concealing property, or or imprisonment for up to 20
Did you pa	ay or agree to pay some	eone who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				otcy Petition Preparer's Notice, and Signature (Official Form 119)
that they ar	re true and correct.	that I have read the sun	nmary and schedules filed	d with this declaration a	and
Travis	IVIS M Edmonds B M Edmonds Ure of Debtor 1		Signature of I	Debtor 2	

Date _____

Date April 4, 2018

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	l in this inform	otion to identify you				
	ebtor 1	ation to identify you Travis M Edmor				
		First Name	Middle Name	Last Name		
1 -	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS		
0	an number					
1	nown)					Check if this is an
						mended filing
\bigcirc	fficial For	m 107				
			Affairs for Individ	luals Filing for B	ankruptcy	4/16
Be info	as complete ar ormation. If mo mber (if known	nd accurate as poss ore space is needed,). Answer every que	ible. If two married people a attach a separate sheet to t stion.	re filing together, both are his form. On the top of an	equally responsible for sup	
Pa	rt 1: Give De	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	us?			
	☐ Married					
	Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
	Yes. List	all of the places you	lived in the last 3 years. Do no	t include where you live now	I.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	3408 birch Hazel Cres		From-To: 2015-2016	☐ Same as Debtor	I	☐ Same as Debtor 1 From-To:
3. stat	tes and territorie No	es include Arizona, Ca	ver live with a spouse or leg llifornia, Idaho, Louisiana, Nev hedule H: Your Codebtors (Off	vada, New Mexico, Puerto R		
Pa	rt 2 Explain	the Sources of You	ır Income			
4.	Fill in the total	amount of income yo	nployment or from operating ou received from all jobs and a have income that you receive	Il businesses, including part-	time activities.	ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calendar anuary 1 to Dec	year: cember 31, 2017)	■ Wages, commissions, bonuses, tips	\$14,223.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Case number (if known) Document Debtor 1 Travis M Edmonds

			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ndar year be o December		■ Wages, commissions, bonuses, tips	\$12,639.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
Include in and othe winnings	ncome regard or public bene or If you are fil	dless of wheth fit payments; ing a joint cas	pensions; rental income; inter e and you have income that y	o previous calendar years? amples of other income are a rest; dividends; money collect you received together, list it o tely. Do not include income the	ted from lawsuits; royalties; nly once under Debtor 1.	
_		o g. 00000	caon coarco copara	,. 20		
□ No ■ Yes	s. Fill in the de	etails.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	ry 1 of curre ı filed for baı		Social Security Benefits	\$5,500.00		
or last cale	endar year:	31 2017)	Social Security Benefits	\$15,348.00		
	o December	31, 2017)	Delicits			
January 1 to	o December ndar year be o December	fore that:	Social Security Benefits	\$15,348.00		
or the caled lanuary 1 to	ndar year be o December st Certain Pa er Debtor 1's Neither De	ofore that: 31, 2016) ayments You s or Debtor 2 ebtor 1 nor D	Social Security Benefits Made Before You Filed for s debts primarily consumerable of the second sec	Bankruptcy r debts? umer debts. Consumer debts	are defined in 11 U.S.C. §	101(8) as "incurred by a
or the cale lanuary 1 to	ndar year be o December st Certain Pa er Debtor 1's Neither De individual	ayments You s or Debtor 2 ebtor 1 nor D primarily for a	Social Security Benefits Made Before You Filed for s debts primarily consume bettor 2 has primarily consume personal, family, or househo	Bankruptcy r debts? umer debts. Consumer debts ld purpose."		101(8) as "incurred by a
or the cale lanuary 1 to	ndar year be o December st Certain Pa er Debtor 1's Neither De individual During the No.	ayments You s or Debtor 2 ebtor 1 nor D primarily for a	Social Security Benefits Made Before You Filed for s debts primarily consumerebtor 2 has primarily consupersonal, family, or househowe you filed for bankruptcy, di	Bankruptcy r debts? umer debts. Consumer debts		101(8) as "incurred by a
or the cale lanuary 1 to	ndar year be o December st Certain Pa er Debtor 1's Neither De individual During the	ayments You s or Debtor 2 ebtor 1 nor D primarily for a e 90 days befor Go to line 7 List below e paid that cre	Social Security Benefits Made Before You Filed for s debts primarily consume bettor 2 has primarily consu- personal, family, or househo bre you filed for bankruptcy, di beach creditor to whom you pai	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more into for domestic support obligi	of \$6,425* or more?	d the total amount you
or the cale lanuary 1 to	ndar year be o December st Certain Pa er Debtor 1's Neither De individual During the No. Yes	ayments You s or Debtor 2 ebtor 1 nor D primarily for a e 90 days befor Go to line 7 List below e paid that cri not include	Social Security Benefits Made Before You Filed for s debts primarily consume pettor 2 has primarily consu- personal, family, or househo are you filed for bankruptcy, di beach creditor to whom you pai editor. Do not include paymen payments to an attorney for the	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more into for domestic support obligi	of \$6,425* or more? n one or more payments an ations, such as child suppo	d the total amount you rt and alimony. Also, do
or the cale anuary 1 to	ndar year be o December st Certain Pa er Debtor 1's Neither De individual During the No. Yes * Subject	ayments You s or Debtor 2 ebtor 1 nor D primarily for a e 90 days befor Go to line 7 List below e paid that con not include to adjustment or Debtor 2 o	Social Security Benefits Made Before You Filed for s debts primarily consume bettor 2 has primarily consume personal, family, or househo better you filed for bankruptcy, di better creditor to whom you pai better better to whom you pai better con 4/01/19 and every 3 year r both have primarily consumples.	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in this for domestic support oblighis bankruptcy case. s after that for cases filed on	of \$6,425* or more? n one or more payments an ations, such as child suppoor after the date of adjustments.	d the total amount you rt and alimony. Also, do
or the cale lanuary 1 to	ndar year be o December st Certain Pa er Debtor 1's Neither De individual During the No. Yes * Subject	ayments You s or Debtor 2 ebtor 1 nor D primarily for a e 90 days befor Go to line 7 List below e paid that con not include to adjustment or Debtor 2 o	Social Security Benefits Made Before You Filed for s debts primarily consume lebtor 2 has primarily consu- personal, family, or househo re you filed for bankruptcy, di charach creditor to whom you pai editor. Do not include paymer payments to an attorney for the con 4/01/19 and every 3 year r both have primarily consu- ire you filed for bankruptcy, di	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in this for domestic support oblighis bankruptcy case. s after that for cases filed on umer debts.	of \$6,425* or more? n one or more payments an ations, such as child suppoor after the date of adjustments.	d the total amount you rt and alimony. Also, do
or the cale lanuary 1 to	ndar year be to December st Certain Pater Debtor 1's Neither Deindividual During the No. Yes * Subject Subject During the	ayments You s or Debtor 2 ebtor 1 nor D primarily for a e 90 days befor Go to line 7 List below e paid that or not include to adjustment or Debtor 2 o e 90 days befor Go to line 7 List below e include pay	Social Security Benefits Made Before You Filed for s debts primarily consume bettor 2 has primarily consu- personal, family, or househo better you filed for bankruptcy, discondition of the consument of the con	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in this for domestic support oblighis bankruptcy case. s after that for cases filed on umer debts.	of \$6,425* or more? n one or more payments an ations, such as child suppoor after the date of adjustment of \$600 or more?	nd the total amount you rt and alimony. Also, do ent. that creditor. Do not

paid

still owe

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7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% of	eral partners; partners or more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	Il partner; corporations gent, including one for
	No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	■ No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	No☐ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached	l, seized, or levied?
	No. Go to line 11.					
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fii	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
	Ordano Name and Address	bescribe the action the	creditor took	taken		Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a
	□ Yes					
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup	tcy, did you give any gift	s with a total value	of more than \$60	0 per person?	•
	No					
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts		Dates	s you gave	Value
	per person	J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		the g		
	Person to Whom You Gave the Gift and Address:					

Case 18-09925 Doc 1 Filed 04/04/18 Entered 04/04/18 18:46:23 Page 43 of 59 Case number (if known) Document Debtor 1 Travis M Edmonds 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or property transferred payments received or debts Address made paid in exchange Person's relationship to you

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Name of trust Description and value of the property transferred Date Transfer was made

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Case number (if known) Document

Debtor 1 Travis M Edmonds

	List of Certain Financial Accounts, In	•		_		our bonofit alocad
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso	or other financial accou	nts; certificates	of deposit		
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, an	ıy safe dep	osit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1	year before	e you filed for bankrupto	y?
	No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any propert	y you borro	owed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)		Describe t	he property	Value
Pai	tt 10: Give Details About Environmental Info	ormation				
For	the purpose of Part 10, the following definiti	ons apply:				
	Environmental law means any federal, state toxic substances, wastes, or material into t regulations controlling the cleanup of these	he air, land, soil, surfac	e water, ground	• .	•	
	Site means any location, facility, or property to own, operate, or utilize it, including dispose	•	environmental la	aw, whethe	er you now own, operate	, or utilize it or used
	Hazardous material means anything an env hazardous material, pollutant, contaminant		as a hazardous	waste, haz	ardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings th	at you know about, reg	ardless of when	they occur	rred.	
24.	Has any governmental unit notified you that	t you may be liable or p	otentially liable	under or in	violation of an environ	mental law?
	No					
	☐ Yes. Fill in the details.					

Name of site

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

Case 18-09925 Doc 1 Filed 04/04/18 Entered 04/04/18 18:46:23 Document Page 45 of 59 ase number (*if known*) Debtor 1 Travis M Edmonds 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Travis M Edmonds Signature of Debtor 2 **Travis M Edmonds** Signature of Debtor 1 Date April 4, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Document

Debtor 1 Travis M Edmonds

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Fill in this inform	mation to identify your	case:		
Debtor 1	Travis M Edmond			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
			FRICT OF ILLINOIS	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	IRICI OF ILLINOIS	
Case number				— 0
(if known)				☐ Check if this is an amended filing
				amended illing
0(":	400			
Official Fo				
Statemer	<u>nt of Intentio</u>	n for Indiv	<u>riduals Filing Under Chap</u>	oter 7 12/15
	ividual filing under cha e claims secured by yo	•	I out this form if:	
	e claims secured by yo sed personal property a		ot expired	
			ot expired. you file your bankruptcy petition or by the dat	e set for the meeting of creditors,
	ever is earlier, unless th		e time for cause. You must also send copies to	
	eople are filing together nd date the form.	r in a joint case, bo	th are equally responsible for supplying correct	ct information. Both debtors must
_				
	and accurate as possib our name and case nur		needed, attach a separate sheet to this form.	On the top of any additional pages,
		,		
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
		art 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	erty (Official Form 106D), fill in the
information be Identify the cre	elow. editor and the property t	hat is collateral	What do you intend to do with the property	that Did you claim the property
			secures a debt?	as exempt on Schedule C?
Creditor's C	Capital One Auto Fina	ance	☐ Surrender the property.	□ No
name:	-		☐ Retain the property and redeem it.	_
Description of	2014 Nissan maxir	na 58000	Retain the property and enter into a	■ Yes
property	miles	11a 30000	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:			Contain the property and [explain].	
	our Unexpired Persona		in Cabadula C. Eurasidami Candusada and Unasi	mined Lease (Official Form 4000) fill
in the informatio	on below. Do not list rea	ase mat you listed il estate leases. Un	in Schedule G: Executory Contracts and Unex expired leases are leases that are still in effect	; the lease period has not yet ended.
			the trustee does not assume it. 11 U.S.C. § 365	
Describe your u	inexpired personal pro	perty leases		Will the lease be assumed?
		•		
Lessor's name: Description of lea	acad			□ No
Property:	uoou			☐ Yes
Lessor's name:	anad			□ No
Description of lease Property:	aseu			☐ Yes
. ,				□ 163
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	tor 1	Travis M Edmonds	Case number (if known)	
Des	cription	n of leased		
	perty:		ı	☐ Yes
	sor's na	ame: n of leased	I	□ No
	perty:		I	☐ Yes
	sor's na	ame: n of leased	I	□ No
	perty:	Torreased		☐ Yes
	sor's na	ame: n of leased		□ No
	perty:	Torreased		☐ Yes
	sor's na			□ No
	cription perty:	n of leased		☐ Yes
Part	3:	Sign Below		
		alty of perjury, I declare that at is subject to an unexpire	nave indicated my intention about any property of my estate that sec ease.	ures a debt and any personal
Χ	/s/ Tı	ravis M Edmonds	X	
	Trav	is M Edmonds	Signature of Debtor 2	
	Signa	ture of Debtor 1		
	Date	April 4, 2018	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-09925 Doc 1 Filed 04/04/18 Entered 04/04/18 18:46:23 Desc Main Document Page 53 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Travis M Edmonds		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMP	ENSATION OF ATTOR	NEY FOR DE	BTOR(S)			
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	0.00			
	Prior to the filing of this statement I have received	ed	\$	0.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed co	mpensation with any other person t	ınless they are memb	pers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed competopy of the agreement, together with a list of the						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; [Other provisions as needed] 						
	Negotiations with secured creditors to reaffirmation agreements and applica 522(f)(2)(A) for avoidance of liens on the secured creditors to the secured creditors to the secured creditors as the secured creditors to the secured creditors as the secured creditors are secured creditors.	tions as needed; preparation	mption planning; and filing of motion	preparation and filing of ons pursuant to 11 USC			
6.	6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.						
		CERTIFICATION					
	I certify that the foregoing is a complete statement of pankruptcy proceeding.	any agreement or arrangement for	payment to me for re	presentation of the debtor(s) in			
Δ	April 4, 2018	/s/ Allison K. Muth	1				
\overline{L}	Date	Allison K. Muth 63 Signature of Attorney					
		Justice Law Grou					
		6847 W. Cermak R					
		Berwyn, IL 60402- 708-400-0000 Fax					
		allison.muth.law@					
		Name of law firm					

United States Bankruptcy Court Northern District of Illinois

In re	Travis M Edmonds		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors: 47				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.					
Date:	April 4, 2018	/s/ Travis M Edmonds Travis M Edmonds Signature of Debtor				

Afs Acceptance Llc 1475 W Cypress Creek Rd Fort Lauderdale, FL 33090

Allied Business Services Allied Business PO Box 1799 Holland, MI 49422

Allied Business Services Allied Business PO Box 1799 Holland, MI 49422

Allied Business Services Allied Business PO Box 1799 Holland, MI 49422

Ars Collections MOney Recovery Nationwide PO Box 13129 Lansing, MI 48901

Cadillac Accts Rec Mg CARM PO Box 358 Cadillac, MI 49601

Capital One Auto Finance PO Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance PO Box 30285 Salt Lake City, UT 84130

Community Healthcare System PO Box 88102 Chicago, IL 60680

Convergent Outsourcing COnvergent Outsourcing, Inc PO Box 9004 Renton, WA 98057 Creditors Discount & A Cda/Pontiac Attn: Bankruptcy PO Box 213 Streator, IL 61364

Creditors Discount & A Cda/Pontiac Attn: Bankruptcy PO Box 213 Streator, IL 61364

Creditors Discount & A Cda/Pontiac Attn: Bankruptcy PO Box 213 Streator, IL 61364

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Creditors Discount & A Cda/Pontiac Attn: Bankruptcy PO Box 213 Streator, IL 61364

Creditors Discount & A Cda/Pontiac Attn: Bankruptcy PO Box 213 Streator, IL 61364

Custom Coll Srvs Inc PO Box 10428 Merrillville, IN 46411

Custom Coll Srvs Inc PO Box 10428 Merrillville, IN 46411

Custom Coll Srvs Inc PO Box 10428 Merrillville, IN 46411

Custom Coll Srvs Inc PO Box 10428 Merrillville, IN 46411 Custom Coll Srvs Inc PO Box 10428 Merrillville, IN 46411

Custom Coll Srvs Inc PO Box 10428 Merrillville, IN 46411

Dianon Pathology/LCA Collections P.O. Box 2240 Burlington, NC 27216

Harris & Harris 111 W. Jackson Blvd Chicago, IL 60604

Hertg Accpt 1420 S. Michigan South Bend, IN 46556

IN Office of the Attorney General Indian Government Center South, 5th 302 W. Washington Street Indianapolis, IN 46204

Institute Foot & Ankle Reconst 9120 Doubletree drive Crown Point, IN 46307

Komyatte & Casbon, P.C. 9650 Gordon Drive Highland, IN 46322

Komyatte & Casbon, P.C. 9650 Gordon Drive Highland, IN 46322

Methodist Hospital 27312 Network Place Chicago, IL 60673

Methodist Physician Group 27338 Network PL Chicago, IL 60673

Munster Radiology Group P.C. 18400 Chicago Ave Lansing, IL 60438

Okolocha Medical Corporation 2054 Grant Street Gary, IN 46404

Penn Credit PO Box 988 Harrisburg, PA 17108

Profess Acct Professional Account Management 633 W Wisonsin Ave, st 600 Milwaukee, WI 53203

RRS, Inc. P.O.Box 3333 Munster, IN 46321

South Bend Orthopaedic Associates, ATTN: 17227C P.O. Box 14000 Belfast, ME 04915

Syliva Garcia c/o Kane County Clerk of Court 540 S. Randall Road Saint Charles, IL 60174

The University of Chicago Medicine 33343 Collections Center Drive Chicago, IL 60693

The University of Chicago Medicine 33343 Collections Center Drive Chicago, IL 60693

theresa correa

Theresa Correrra

Trustmark Recovery Services 541 Otis Bowen Dr. Munster, IN 46321

United Recover Services, LLC 18525 Torrence Ave. Suite C-6 Lansing, IL 60438

Us Dept of Ed/Glelsi
Us Dept of Ed/Great Lakes HIgher Ed
2401 INternational Lane
Madison, WI 53704

Us Dept of Ed/Glelsi Us Dept of Ed/Great Lakes HIgher Ed 2401 INternational Lane Madison, WI 53704

Weng Peng MD 3641 Ridge Road Ste 5 Highland, IN 46322